Department of Building Safety, Inspection & Enforcement

210 Plandome Road, Manhasset, NY 11030-2326 • Tel. 516-869-6311 • Fax 516-869-7662

www.northhempsteadny.gov

<u>APPLICATION FOR FLOODPLAIN DEVELOPMENT PERMIT FOR DEMOLITION</u> <u>REQUIREMENTS SHEET</u>

Refer to §2-9 and 21-12 of the Code of the Town Of North Hempstead

All Applications for a Demolition Permit shall include the following documentation:

- 1. Three (3) copies of the completed Application for Demolition Permit.
- 2. Two (2) copies of a legal survey of property showing the location of all of the structure(s) to be removed with spot elevations and topographic information adequate to provide preexisting elevation information for any new structure that will be located on the property. Survey shall indicate spot elevations as noted herein:
 - a. At each corner of the structure(s) to be demolished.
 - b. At each change in direction of the property line.
 - c. A minimum of every 25' along each length of the property line.
- 3. Photographs of all of the elevations of the building(s) to be demolished.
- 4. LIPA letter(s) of disconnect (gas and/or electric as required). *
- 5. Water District letter of disconnect. *
- 6. Sewer District letter of disconnect. *
- 7. Nassau County Department of Health Certificate of Rodent Free Inspection (expires 10 days from issuance). *
- 8. Contractor insurance forms. *
 - a. Liability Insurance naming the Town of North Hempstead as certificate holder.
 - b. Workers' Compensation Insurance:
 - i. C-105.2 (private insurance), naming the Town of North Hempstead as certificate holder.
 - ii. U-26.3 (from the State Insurance Fund), naming the Town of North Hempstead as certificate holder. For DEMOLITION, this form must specifically name or identify the address of property covered for demolition.
 - iii. SI-12 (self-insurance) does not name a certificate holder.
 - iv. GSI-105.2 (certificate of participation in WC Group self insurance), naming the Town of North Hempstead as certificate holder.
 - c. CE-200 (exemption from WC and Disability). Must be submitted for <u>each</u> separate job or location of work.
 - d. Disability Insurance:
 - i. State of New York Workers Compensation Board form DB-120.1 (private insurance).
 - ii. DB-155 (self insurance) does not name a certificate holder.
- 9. For legalization projects Legalization of Existing Construction Supplemental Form.
- 10. Two (2) copies of project documentation as specified in Section 21-12 B of the Code of the Town of North Hempstead.

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11. Demolition Permit fee:

Residential one and two family:	\$250 for a building or structure or part thereof		
Residential multifamily	\$250 for a building or 'structure or part thereof		
Residential accessory structure	\$150 for a building or structure or part thereof		
Commercial	\$350 for a building or structure or part thereof. If the demolition is a necessary part of an alteration or which a permit has been issued, no additional fee shall be required.		
Commercial accessory structure	\$250 for a building or structure or part thereof. If the demolition is a necessary part of an alteration for whic permit has been issued no additional fee shall be required		
Mixed Use	\$350 for a building or structure or part thereof. If the demolition is a necessary part of an alteration for which a demolition is a no additional fee shall be required.		

12. Floodplain Permit fee: Applications for a floodplain development permit shall be accompanied by an application fee in the amount indicated in the Town of North Hempstead Fee Schedule. In addition, the applicant shall be responsible for reimbursing the Town of North Hempstead for any additional costs necessary for review, inspection, and approval of the project. The Local Administrator may require a deposit of no more than \$500 to cover these additional costs.

Applicant shall provide complete information on all forms.

Do not leave any item blank. Incomplete applications will not be accepted for filing.

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^{*} Item not required to be submitted at the time of filing. Forms and information shall be required prior to issuance of a building permit.

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APPLICATION FOR FLOODPLAIN DEVELOPMENT PERMIT FOR DEMOLITION

Issued Pursuant to §2-9 and 21-12 of the Code of the Town Of North Hempstead

Application Number:	er: Permit Number: Certificate Number:			Permit Number:		Certificate Number:	
Residential Structure [Commercial Structure	:[]	Accessory Structure []				
Section: Block:	Lot(s):	s): Date:					
Address of Permit Activity:							
Street: Ci	ty: State	e:	Zip:				
Owners Information:							
Last: First	Corpor	ation:					
Street: Ci	ty: State	e:	Zip:				
Telephone Number:	Fax	Number:					
Cell Phone Number:	E-mai	Address:					
Applicant's Information:							
Street: Ci	ty: State	e:	Zip:				
Telephone Number:	Fax	Number:					
Cell Phone Number:	E-mai	l Address					
Location of Permit Activity:	Feet,NSWE (che	ck one) of					
Description of Work:							
 Contractor shall contact the building it Demolition debris shall be removed from the properties of the propertie	n the site promptly and shall be dispose be employed before, during and after the erected and maintained around the per- tupon approval of the Commissioner ration:	of any demoliced of at an appreche demolition rimeter of the pof Buildings of	tion activity. oved site for the material in question. to control the generation of fugitive premises before, during and after the ar his authorized representative.				
Street: First: _							
Telephone Number:	•						

FOR OFFICIAL USE ONLY

No errors, omissions, or oversights on the part of the Plans Examiner shall release the design professional, applicant and/or owner of the responsibility to comply with all requirements of the New York State Building Code, the Laws of the Town of North Hempstead, and all other applicable codes and standards having authority over the work

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OWNER'S AUTHORIZATION

I (we) herby certify that:

- 1. I (we) agree to permit the Building Inspector and any officer or employee of the Town of North Hempstead to enter upon the premises in the discharge of their duties with this application.
- 2. Approved plans and a copy of the approved permit shall remain on the premises at all times until a Certificate of Completion is issued. These plans shall be made available to the Building Inspector upon request.
- 3. Building Inspector shall be given a minimum forty-eight (48) hours notice to make the required inspection and no work shall continue until such inspection has been completed and approved.
- 4. Owner or his/her representative shall be responsible to arrange for all required inspections.
- 5. Owner shall be responsible for the presence of the appropriate representative for the required inspection as directed by the Building Inspector.
- 6. Permit shall expire three (3) months from the date of issuance unless construction is in progress. No work is to be started until permit has been received and posted by the owner / applicant.
- 7. Work shall be permitted between the hours of 7:30 AM and 6:00 PM, Monday through Friday only.
- 8. I (circle one) [have] [have not] designated an individual or corporation to be the Applicant for the project identified within this Application. If designated, provide the required information:

Name and address of designated App	plicant,	
and that he/she is the (circle one) [les	ssee] [architect] [engineer] or [builder] for the project.	
State of New York } County of Nassau }		
that he/she is the owner in fee of all of SectionBlockunincorporated area of the Town of N eight (8) as here in stated, recognize to failure to comply with any of the item North Hempstead, may result in the total control of the state of t	(Property Owner) deposes and says that he/she resides at in certain lots, parcel of land shown on the attached survey, Lot (s) situated, lying and being where the latter of the lat	vithin the (1) through rty, and that own of
Signature of Owner		
Sworn to me this	Day of, 20	
Signature of Notary Public:		
•	FOR OFFICIAL USE ONLY Final Inspection Date:	
Inspector Signature:		

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	C		er:
		ONTRACTOR LIST	
Section:	Block:	Lot(s):	
ADDRESS OF PERMIT AC	CTIVITY:		
Street:		City:	
State:		Zip:	
GENERAL CONTRACTO	<u>OR:</u>		
Corporation Name:			
		First:	
Street:		City:	
State:	Zip:	License Number:	
Telephone Number:		Fax Number:	
PLUMBING CONTRACT	<u>ΓΟR:</u>		
		First:	
		City:	
State:	Zip:	License Number:	
Telephone Number:		Fax Number:	
ELECTRICAL CONTRA	CTOR:		
Corporation Name:			
		First:	
		City:	
		License Number:	
Telephone Number:		Fax Number:	
CONTRACTOR:			
Corporation Name:			
		First:	
		City:	
		License Number:	
Telenhone Number		Fay Number	

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